POLK SOIL & WATER CONSERVATION DISTRICT **Application for Cost Share — Stormwater BMPs**

Application Received (Date):	By (Staff):	Entered in	n FARMS:	_ Application #	
APPLICANT INFO APPLICANT TYPE					
	Last Name:				Owner
ADDRESS:CITY:	STATE:	7IP CODE:		☐ Agent ☐ Contract Buyer ☐ Previous Owner	
EMAIL			En CODE		Tenant Contract Seller
PHONE #(s)			home / cell		
		– – – – his a Busin	ess Account?		
<u>YES</u>				<u>NO</u>	
Last 4 digits of EIN: XX-XXX			Last 4 digits of SSN: XXX-XX		
Business Name:			Alias/Doing Business As (e.g., Trust under SSN):		
Business Type:					
☐ Corporation ☐ Partnership ☐ Trust ☐ LLC**			Note: All applicants must have a W-9 on file. Businesses must also have a IDALS Legal Entity Form on file.		
**LLC filing as \(\Boxed{\text{Partnership}} \(\Delta \text{Corporation} \(\Delta \text{ Sole Proprietor.} \)					
Other:		_			
LOCATION INFO LEGAL DESCRIPTION (Applicant provides):			ICE REQUESTED Tame Maintenance Agree		
		☐ Soil Quality Restoration 5 yr			
Parcel Number: LEGAL DESCRIPTION (CA provide TN R (Quarter) (Section) (Tow Easter Lake Watershed Unincorporated Polk County All practices will be designed standards of the Iowa Story Management Manual (ISW) Rain Garden Design and Install Learn more: iowastormwater.org	to meet the mwater MM) or	☐ Biosw ☐ Grasse ☐ Green ☐ Infiltr. ☐ Infiltr. ☐ Native ☐ Perme ☐ Rain (☐ Sand) ☐ Storm ☐ Under ☐ Dry D ☐ Extend ☐ Storm ☐ Storm ☐ Storm ☐ Storm ☐ Storm	tention Cell 10 yr vale 10 yr ed Swale 10 yr Roofs 10 yr ation Basin 10 yr ation Trench 10 yr e Landscaping 10 yr eable Pavement 10 yr cable Pavement 10 yr Filter 10 yr water Filter Strip 10 ground Sand Filter Detention Basin 20 yr ded Dry Detention F ow Wetland 20 yr water Wetland 20 yr water Wet Pond 20 yr water Wet Pond 20 yr ment Forebay 20 yr) yr 10 yr Basin 20 yr	Unless otherwise noted, REAP-P cost share is at 50% of the eligible or estimated cost, whichever is less. Easter Lake Watershed Project funding may be able to provide up to 75% of the eligible or estimated cost, whichever is less.

By submitting this application, I understand that it is subject to the eligibility requirements of the program; that any practices completed with cost share will be bound by a maintenance agreement; and I grant SWCD representatives the right of ingress and egress to my land for conservation planning purposes.

X

Signature

Date